

CLAIMS ONLY								Application Number <b>09/864,857</b>		Filing Date	
								Applicant(s)			
								* May be used for additional claims or amendments			
CLAIMS	AS FILED <b>10-18-04</b>		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		<b>10-18-04</b>				
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1											
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**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

09/864857

FILING DATE

OFFICE (75)

10-18-04

CLAIMS

10-18-04

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101		1				
102		1				
103		1				
104		1				
105		1				
106		1				
107		1				
108		1				
109		1				
110		1				
111		1				
112		1				
113		1				
114		1				
115	1					
116		1				
117	1					
118		1				
119		1				
120		1				
121		1				
122	1					
123	1					
124		1				
125		1				
126		1				
127		1				
128		1				
129		1				
130		1				
131		1				
132		1				
133		2				
134		2				
135		2				
136		2				
137		2				
138		2				
139		2				
140		2				
141		2				
142		2				
143		2				
144		2				
145		1				
146		2				
147		2				
148		2				
149		2				
150		2				
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
151		2				
152		2				
153		2				
154		2				
155		2				
156		2				
157		2				
158		2				
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197						
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200						
TOTAL IND.	5	↓		↓		↓
TOTAL DEP.	127	←		←		←
TOTAL CLAIMS	132					

2